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Haunted by a Different Ghost: Re-thinking Moral Injury

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Abstract

Coined by Jonathan Shay, a clinician who works with combat veterans, the term 'moral injury' refers to an injury that occurs when one's moral beliefs are betrayed. Shay developed the term to capture the shame and guilt of veterans he saw in his clinical practice. Since then, debates about moral injury have centered around the 'what' (what kinds of actions count as morally injurious and why?) and the 'who' of moral injury (should moral injuries be restricted to the guilt and shame that I feel for what I do? Or is it possible to be morally injured by what I witness?). Clinicians universally acknowledge the challenge of treating moral injuries. I will argue that this is in part because there is an essential piece of the theoretical construct that has been left behind. Namely, when veterans are morally injured, they are not only haunted by what they have done (or failed to do) but also by the specter of a world without morals.
Introduction

Current reports on veteran suicide data estimate that 22 veterans commit suicide every day, and this is a statistic that is cited often. What many people do not know is that these current reports do not include veterans who have been dishonorably discharged, nor those who are active service members, nor those who die by overdose, nor the deaths that occur in Texas and California as these states have not provided data.¹ There is significant reason, then, to think that the actual number of suicides due to military related PTSD is much higher than 22 people a day.

There have been attempts to figure out just why reintegrating into civilian life post-war is so problematic, and each have pointed to a different villain. Some cite our inability to connect emotionally to one another in general. Others blame our contradictory social mores that demand that soldiers remain simultaneously heroically pure while they commit what we normally deem atrocities. It is certainly possible that all of these factors play a role in the prevalence of PTSD. What is perhaps more likely is that we struggle to successfully treat PTSD because we do not understand it well enough.

Moral injury is a promising area of research when it comes to uncovering hidden contours of PTSD. Coined in the 1990’s by Jonathan Shay, the term is meant to address a layer of psychological injury that is not adequately accounted for in current psychological models: specifically, the feelings of guilt and shame that one is haunted by post combat. Research on moral injury has led to the fruitful creation of treatment paradigms that focus on self-forgiveness, the communalization of trauma, as well as preventative measures that could be taken up in order to protect service members from these injuries altogether.²

Although much progress has been made helping veterans recover from moral injury, the current suicide rates reveal that reintegration remains an urgent issue, and there is still much work to be done. In this paper, I would like to reconsider moral injury from another perspective. I will suggest that there is a piece that is implied in other accounts


of moral injury that needs to be made explicit. Namely, when veterans are morally injured, they are not only haunted by what they have done (or failed to do) but also by the specter of a world without morals. It is my contention that until the meaning of this more global loss is taken into account, moral injury will remain an untreatable wound for some.

In the first section of the paper, I will briefly detail the history of moral injury into the present. Then I will articulate just what I think is missing from the current theoretical account of moral injury. In the second section, I will bring in the phenomenological perspective of Maurice Merleau-Ponty in order to analyze accounts of moral injury from the psychological literature and from my own qualitative research on reintegration. I will argue that Merleau-Ponty’s phenomenological viewpoint - with its focus on structures of meaning and the way that experience can fundamentally alter our engagement with the world—allows us to see a different ghost that the veteran is haunted by when she is morally injured. Though this is certainly beyond the scope of this current work, it is my hope that this could lay the groundwork for treatment paradigms that are phenomenologically informed and that are able to account for a piece of moral injury that we have been missing.

1. Moral Injury Past & Present

The groundwork for our current understanding of moral injury begins with the first definition of Posttraumatic stress syndrome (PTSD) in the Diagnostic and Statistical Manual of Mental Disorders in its third iteration (DSM-III) in 1980. The entry included a clause targeted specifically at the guilt and shame one might feel post-war. The clause specifies that symptoms might include, “guilt about surviving while others have not or about behavior required for survival.”

What is noteworthy about that clause is that it suggests that a key part of traumatic symptomology has to do with being haunted by one’s sense of failing morally, either by failing to protect, by simply surviving when others didn’t, or by perpetrating violence in

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order to survive. Though the clause quickly disappeared from the DSM,\textsuperscript{4} the idea behind it has remained in use, and theorists and clinicians have continued to use the term ‘moral injury’ in two senses. According to Jonathan Shay,

Moral injury is present when there has been (a) a betrayal of ‘what's right’; (b) either by a person in legitimate authority (my definition), or by one's self—“I did it” (Litz, Maguen, Nash, et al.); (c) in a high stakes situation. Both forms of moral injury impair the capacity for trust and elevate despair, suicidality, and interpersonal violence. They deteriorate character.\textsuperscript{5}

At this moment, most conversation and research about moral injury has been focused on three issues. The first harkens back to its inclusion and then removal in the DSM in the 1980’s. The question here is whether moral injury is appropriately captured within the diagnostic category of PTSD. Shay and others argue (quite convincingly), that it is not.\textsuperscript{6}

A second issue pertains to the ‘who’ of moral injury. According to Shay, moral injury can occur because of what he calls “leadership malpractice.” He argues that one can be morally injured when one is betrayed by, or witnesses a betrayal perpetrated by, someone else. Shay argues that in his experience with veterans, the latter experience can be just as damaging as the former, and further that they are often entangled. He says,

Think of a situation where an infantry Marine is ordered to leave behind a wounded buddy and the Marine obeys the order; or think of sexual coercion by your rating senior in the chain of command targeting one of your subordinates and you fail to protect him or her.\textsuperscript{7}

The opposing model is one in which moral injury is restricted to what one actively does (or fails to do, but more often what one actively does). In this case, one might imagine a

\textsuperscript{4} In the revised edition (DSM-III-R), published in 1987, this clause was removed. The rationale for removal was that though survival guilt was present in many cases of PTSD, it was not present in all. Given this fact, and since parsimony was an important feature of the DSM, the subcommittee decided that the removal would not result in false negative diagnoses. See, Elizabeth A. Brett, et al., “DSM-III-R Criteria for Posttraumatic Stress Disorder,” \textit{American Journal of Psychiatry} 145:10 (October, 1988): 1232-1236.


situation in which a soldier is tasked with clearing a village in Kandahar that is supposed to be evacuated. The soldier comes across an individual who is deemed to be a threat and he kills them, only to find out later that it was an unarmed civilian teenager.

For either model, clinicians argue that the symptoms that arise from moral injury differ in important ways from those of PTSD. For example, where the predominant painful emotions in PTSD are fear, horror, or helplessness, in moral injury the predominant painful emotion are guilt, shame, and anger. Instead of the physiological arousal experienced in PTSD, victims of moral injury more typically experience a withdrawal and isolate themselves from their support systems and society in general. Clinicians suggest that these differences in symptoms are enough to warrant an alternative model for understanding and treating moral injury.  

This brings us to the third issue surrounding moral injury. This is how best to treat moral injury. When we say that someone has suffered a moral injury we mean that they have done something or experienced something that transgresses their moral beliefs in a significant way. Thinking of oneself as a generally good person, and then participating the ridicule and abuse of civilians during wartime, is one example. How can one square what one has done (which one has previously labeled as immoral) with one’s sense of oneself as a generally moral person?

Treatment paradigms have focused on grappling with the predominant painful emotions that accompany these injuries. Self-forgiveness, the forgiveness of others, and connecting with communities of people who share similar experiences play important roles. Shay argues that if we raise the ethical standards within military leadership, we can avoid many cases of moral injury altogether.

In all of these discussions, there is an underlying assumption that the veteran is haunted by a particular ghost, rather than by the specter that the experience leaves her with in general. The theoretical framework implies that moral injury is rooted in singular events (or even sets of events) that refuse to recede into the past and therefore remain present for the victim. Though this may be the case with trauma in general, there may be something more complicated going on in the case of moral injury.

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8 Litz, et. al. (2009).
9 Ibid., 702-704.
Perhaps what is going on in at least some cases of moral injury is that the veteran is haunted by a different kind of ghost. It is not the guilt or shame that results from the act one has done, (or failed to do, or that someone else has done). Rather, it is that the experience has thrown the meaning of morality into question. It isn’t just that something was done that was ‘wrong’ or that someone was subject to or witnessed a betrayal, it’s that the experience of war shatters one’s sense of rightness and wrongness altogether.

This may seem like a small alteration in the definition of moral injury, but the implications on treatment are profound: previous treatment models assume that the patient retains her basic moral beliefs through the experience of war—that the veteran still at core believes in whatever moral values they did before the experience. This may not be true—and it may not be possible to recover those moral values. Instead of being haunted by the act she has committed, the veteran may be haunted by the idea that morals are arbitrary social constructs and not metaphysical truths. This should not necessarily mean that recovery is impossible. Current treatment focuses on freeing patients of their shame and guilt for those singular events/acts—perhaps treatment should also focus on how to cope with a world that has become morally irreconcilable.

2. Using Phenomenology to Re-Think Moral Wounds

Maurice Merleau-Ponty argues that in order to gain a full understanding of any human phenomenon, one must return to the phenomenon as it is lived. “When the victim of hallucinations declares that he sees and hears, we must not believe him, since he also declares the opposite; what we must do is understand him.”11 In other words, we should attempt to understand the phenomenon from the inside.

It is especially important to take this ‘from the inside’ perspective when it comes to moral injury because it is not a simple, singular, or predictable injury. As Nancy Sherman notes in her book Afterwar, there are “a variety of moral injuries suffered and [a] variety of repair... there is no one type of moral injury... no one-size-fits-all model of a soldier.”12 Unlike a broken bone, which can be scanned and set in a fairly straightforward way, moral injury hides in the psyche of the wounded. It has to be uncovered individually before it can be treated.

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Beyond understanding the injury ‘from the inside,’ to understand something from a phenomenological perspective is to understand it as something that is individually and perceptually meaningful. One thing that Merleau-Ponty does so beautifully in his work is to emphasize how deeply perception is entangled with meaning for human beings. In this section, I will use the perspective of phenomenology from Merleau-Ponty to analyze five very brief accounts of moral injury. I will argue that if we take this perspective and turn it toward moral injury, we can understand that the guilt and the shame at what one has done is only one piece of moral injury. An additional layer of moral injury—at least in some cases—is the loss of moral structure in general. Focus on this additional layer may help us better understand the symptoms that we see in conjunction with moral injury and better treat them. First it is worth briefly unpacking Merleau-Ponty’s conceptions of perception and meaning, and how they are entangled.

Merleau-Ponty argues that a human being exists in a dynamic interaction with the world, having before her a particular horizon, or phenomenal field that she engages with. In the broadest terms possible, the horizon is what is available to consciousness. However, there is a crucial caveat: what is perceived, what comprises the horizon, is shaped not just by objective truths in the external world, but also by meanings conveyed by and in pre-theoretical experience.

Alphonso Lingis suggests that the kind of embodied being-in-the-world that Merleau-Ponty has in mind is one that is constituted by what he calls the interrogative mood by pointing out that the very perceptions that determine the situation are themselves in flux. Perceptions, their many contingencies, illusions, and contradictions, shape the horizon of the being-in-the-world as one that is never fixed, never fully positively defined. As Lingis explains,

> What we perceive then is not a positive term existing in itself and supporting its own ‘properties’; what we perceive is a contrast, a tension—not an adequation with our substance, but a difference from us, marked out in the continuous fabric of being, of ‘flesh,’ of we too are a part.13

In order to understand what this means in general, and then specifically in regards to moral injury, it is helpful to recall the constancy hypothesis and Merleau-Ponty’s stance on it.

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The constancy hypothesis is the claim that the inputs of consciousness have a constancy to them in their correlation such that the same stimulus will consistently produce the same reaction. Merleau-Ponty rejects the constancy hypothesis. He argues that the reaction that a stimulus produces is not only determined by the stimulus, but also by the individual perceiving it. As he says, the perceptual apparatus is not just a “transmitter.” When we look at something, we don’t simply see it. Rather, “it awakens resonances within our perceptive apparatus.”

The resonances are unique to each of us and to our horizons or phenomenal fields. In other words, the things that we perceive are perceived as this or that, i.e., as bearers of this or that meaning. They are perceived as meaningful in some way. For example, Merleau-Ponty invites us to imagine a child who is attracted to the flame of a candle and touches it, burning herself. Merleau-Ponty points out that the child’s perception of the candle changes from something attractive to something repulsive after this experience. We might be tempted to say that what is going on here is related to a kind of perceptual mistake related to knowledge of the objective world: the child did not know that the flame would burn her, so she misperceived it as something that she could grasp. This is not accurate according to Merleau-Ponty. It is not that the child had an incorrect perception, which has now been corrected since she has been exposed to the objective truth of the external world, but that her experience has colored her horizon such that the immediate perception of fire is now imbued with a different meaning. To put it another way, the resonances that it awakens were once attraction and are now fear or repulsion. Merleau-Ponty explains, “Vision is already inhabited by a meaning which gives it a function in the spectacle of the world and our existence.” In other words, it is incorrect to assume that we perceive things, and then reflect, and then establish meaning — but that we perceive things as meaningful. What we experience, then, informs how we perceive the world. It colors our horizon. There is much more that can be said about these basic ideas in Merleau-Ponty’s phenomenology. However, even this brief gloss on Merleau-Ponty’s phenomenology of perception can be used to reframe the discussion of moral injury.

The emphasis on meaning in perception helps us to understand moral injury because it shows us that it is not simply that the victim of moral injury is coping with a singular event and struggling to reconcile that singular event; rather, the injury extends out to their perceptual world at large. The world as they experience it in general has been

stamped with the meaning that the injury carries with it. It is not just that the child understands that flame to be dangerous, but fire in general. Each time she perceives fire, her perception is now imbued with that meaning. The same is true with the veteran. Except in this case, the veteran’s perception is imbued with war and all of the meaning that war carries with it.

It seems that something that is occurring in moral injury is that war—in all of its paradoxes, sacrifices, losses—challenges the combat veteran’s idea that there is any sort of moral structure that holds at all. This is so crucial because if we fail to treat what the injury has come to mean the wound, and not the veteran, will continue to thrive.

In the following account, one of Jonathan Shay’s patients, a veteran from Vietnam, describes a situation in which he witnessed the death of a fellow combat soldier.

When you jump off a tank, we were always taught to jump off the right front fender. And that’s exactly where I jumped. I jumped off and started clearing away some brush and shit, and going to put up the lean-to. And I started doing it.

And [he] yells down, he says, ‘I’ll do it. Get that fucking pep—.’ I had pepperoni, cans of raviolis, that’s what I can remember. I had other stuff, I don’t know what the hell it was. But I remember the pepperoni had all white furry stuff on it from the heat. I got back up. I got back on, on the right side in the back sprocket, y’know, crawled to the back, so the turret’s in front. And the turret’s here, and here’s my package. So I opened the package.

And [he]’s probably fifteen feet away. And when he jumped, he jumped… ah-WHUH… He jumped on a mine.

And there was nothing left of him. He wasn’t a harmful person. He wasn’t a dirty person. He had this head that was wide up at the top, and his chin come down to a point. He had this hair he used to comb to his right side, and he always had this big cowlick in back. Big old cowlick. And when he smiled—you ever hear ‘ear to ear’?—it was almost a gooney-looking smile. You know, it was just WA-a-ay—it was huge. He just had this big, huge smile. He never said nothing bad about nobody. He was just… he was a caring person.

And when you’re on a tank, it’s like a closeness you never had before. It’s closer than your mother or father, closer than your brother or sister, or whoever you’re closest with in your family… Because you get three guys that are on that tank, and you’re just stuck together. You’re there.

It should’ve been me.
I jumped first. It didn’t blow me up. Sa-a-ame spot. Same spot. Same exact spot.16

In a world where structures of justice hold—where goodness is rewarded and evil punished—this situation sticks out because it is senseless. It does not fit the mold of right and wrong and this is why it remains present for the veteran. This is why it is so traumatic, because it shatters those structures of justice. At one point Sherman aptly calls this kind of moral injury ‘moral dislocation,’ suggesting that in these cases, one’s moral foundation has been disturbed or fractured. Something essential has been displaced and won’t right itself.17

We can hear this in the veteran’s account: his explanation of the sequence of events is inextricably tied to the character of the victim. The victim “wasn’t a harmful person. He wasn’t a dirty person.”18 He had endearing qualities and a great big smile. The veteran is not simply describing his friend; he is attempting to make sense out of the senseless. The implication is that if he were a harmful person, if he were a dirty person, if he didn’t have any endearing qualities, maybe the death would have made sense. What is most relevant here is that the veteran’s entire moral structure is in question. This one episode is so upsetting because of the meaning that it stamps on the world—or, perhaps more accurately, the meaning that it stamps out.

Under the current conceptualizations of moral injury, what this veteran is expressing would most likely be considered a pretty straightforward case of survivor’s guilt. He even directly says toward the end of his account, “It should have been me.” While that is undoubtedly a part of what is going on here, guilt at surviving does not capture the entire phenomenon. This is not simply a matter of getting this veteran to forgive himself for living, for having the audacity to jump on the trigger and somehow not trigger the bomb. In fact, due to the senseless nature of this ‘crime’ of survival, forgiveness seems impossible. How can one be forgiven for something so arbitrary?

It might be the case that in part, guilt is a lesser of two evils, a kind of coping mechanism. If what happened was indeed their fault, then they do not have to come to grips with a world in which senseless death occurs. In this case, we are reminded of how the


perceptual horizon of this veteran has been stamped with the meaning of that event. Again, this meaning is not limited to that particular moment, or to that loss. Rather, it challenges the very structures of morality and moral order that previously held true.

When a veteran is grappling with a moral injury, then, it is not simply a matter of getting her to forgive herself. Even if that is helpful or necessary to alleviate some of the symptoms, it does not treat the underlying problem, which is that the set of moral beliefs that she once relied on are gone. The phenomenological perspective reminds us that the experience has altered the fabric of her horizon altogether; it is not just this particular instance of guilt that is a problem, but the very way that she perceives the world.

For further evidence that illustrates the global loss of a sense of moral structure, I will now turn to qualitative interviews with veterans that have been completed over the past year during research on the complexities of veteran reintegration.19 Similar issues relating to moral dislocation come up again and again.

Participant A: I want to but I don’t know how to say it... The biggest change is that I became significantly more liberal and on the verge of pacifism. If I can do something to prevent, to make sure no one else has to go off to war, I would. Before that [deployment] a lot of people have a romanticized version of what war would be like, of the camaraderie, and things like that. It took me living through that to realize you don't go to war for the camaraderie, the camaraderie is what gets you through that experience. I was never like that before.

Participant B: War changed my moral stance. Over the course of my combat experience, I went from being a Christian, to an agnostic, to an avowed atheist.

In both of these cases, participants admit to enormous shifts and/or loss of belief systems as a direct result of their experience in war. Participant A reluctantly admits that his experience changed his political beliefs drastically. Participant B has suffered a complete crisis of faith and doesn't simply doubt the existence of God but his experience has convinced him that God actively does not exist. While each of these veterans may feel guilt and shame at what they have done or failed to do, there is nothing in the literature on moral injury that can account for this kind of total shattering of morality that they seem to be describing here.

19 The qualitative data cited here was obtained in compliance with all IRB protocol and has been approved by Institutional Review Boards at both College of the Holy Cross and Old Dominion University.
In some cases, you can almost hear the moral structures crumble in the veterans’ narrative.

Participant C: You go out and build these missions to go out and talk to bad people and then soldiers die… It’s nothing that you meant to happen, but the fact that they still would be here if you had not said ‘go find this person’ or ‘go to this location.’ So, you have that. And you sort of learn to put it into perspective, I guess. You try to put it into perspective. You try to think of the greater good that you caused some harm, some loss of life, but it balances out by the greater good. But there’s no guarantee that that happens. [laughs, long pause] It doesn’t happen.

Here we can hear the veteran continue to struggle to place the events of war within a moral system of where things fit neatly into boxes labeled ‘right’ and ‘wrong.’ It is clear that on some level, she believes that she is on the ‘good side,’ that she was sent to foster the greater good. We can hear her struggling to find the balance. The story that she is telling herself is this: if bad things happen there must be a greater good that they aim for. But then the participant immediately admits that there is no guarantee of that. The incredible responsibility that the veteran carried meant that lives were lost at her orders. They were in some very real sense her fault. But this isn’t the only thing that the veteran here is struggling with. It’s also that there is no way to reconcile the experience in general. It’s not just that she has done something wrong (which, arguably, she hasn’t) and is haunted by that—but also that when she tries to use her old moral structures to make sense of it by explaining that lives were lost but that ultimately there was a greater good—she realizes that the moral structures she previously believed in no longer hold.

Finally, one of the participants struggles explicitly with the realization that combat changed him. His experience at war showed him that he is fully capable of killing and what he is surprised and troubled by is his lack of shame or guilt. In the passage below, he describes a pivotal moment on deployment.

Participant F: Where we deployed in Iraq, one of their biggest tactics was, um, they used female suicide bombers. So there was a school there for special needs girls, and they would take the girls, anywhere from 10-15 years old, and they would take them out of the school and rig those explosives and tell them to walk… That changed my moral compass… I have no problem shooting guys in the face. You know, it’s like, ahh, that’s the reason… I mean, that, just really, I mean that was something for me, that I was like [I realized] I do not have any issues, that I can sleep real good at night knowing I shot these guys in the face… That’s tough.
What is ‘tough’ for this soldier is not just the knowledge that young, special-needs girls are being used as suicide bombers (undeniably a tough thing to witness and realize), but also what the experience of that did to his moral structures. Namely, it gave him a perfectly justifiable reason to kill. And not just to kill, but to “[shoot] these guys in the face” and “sleep real good at night knowing” that.

There is a contradiction here that the veteran cannot unravel. He knows that he is not a monster, and yet, he feels no guilt at what he has done. This does not square with his previously held beliefs about the moral structure of the world. He is, in some important sense, not the same person before he deployed, he does not have the same moral views, and he does not see the world the same anymore. Before deployment, he lived in a world where killers were troubled by their deeds; after deployment, he is a killer and untroubled by his actions. What is ‘tough’ for him is not the action; it is the realization that he is not troubled by his actions.

These five accounts are incredibly varied. In the first, the veteran struggles with survivor guilt and the structures of good and evil. In the second and third, veterans experience drastic shifts of moral belief systems, one shift is political and the other religious. In the fourth, we see a veteran actively try to reconcile her guilt with some larger meaning and then fail because she realizes that those structures of meaning are no longer there. In the fifth, we see a veteran disturbed by his lack of guilt, struggling to understand why he isn’t a monster if he has acted like one. What links these varied accounts together is the universal experience that war has fundamentally altered their world views—how their experience has stamped their horizon and changed how they perceive the world and who they are within it. Each of these individuals are indeed haunted, not simply by what they have done or failed to do, but by the fact that their experience in war has changed their world.

What the phenomenological approach allows is a vantage point of the injury that reveals the way that the event can reverberate through the entire phenomenal field and drastically change the way that the subject experiences herself within the world. This is crucial because without it we do not have the whole story. Again, this comes to bear on treatment. Think of Shay’s veteran who feels survivor guilt for being the one spared while his fellow soldier died but also struggles with the senseless nature of the way that he died. It may be possible for him to find a way to forgive himself for his own surviving, but what about the senselessness? Current treatment methods do not account for that part of the injury. What about the third participant, who no longer believes that God exists? Or the fourth who has just realized, mid-interview, that there is no greater good? This relevant part of moral injury—which these accounts
seem to reveal vividly—must be addressed if healing is going to be possible.

Sherman’s work goes some distance in this direction. After detailing a similar story to the one that Shay relates (one in which a soldier is haunted by guilt about something for which he could not possibly be held accountable for), Sherman points out the importance of viewing the injury ‘from the inside’ as Merleau-Ponty might say. If we take this perspective, she explains, we notice that it is not forgiveness that the soldier needs, but rather self-empathy. A critical core of self-empathy is the ability for the soldier to look at the event from an external perspective and give “a fairer and more equitable assessment of responsibility that’s crucial for moral repair.” This might mean that Shay’s soldier realizes that he had absolutely no control over who ended up triggering the buried mine. Or an officer realizes that though it is painful and unfortunate to lose troops while on deployment, that one individual cannot possibly be everywhere at all times. Self-forgiveness is not just impossible, but seems “inapt” according to Sherman, because in order to forgive, one has to assume wrongdoing. Just because the soldier is feeling guilt or shame, this does not mean there was any actual transgression. It is worth noting that though she does not use the terminology herself, it is the phenomenological perspective—this view from the inside—that enabled Sherman to go beyond the paradigm of forgiveness and into self-empathy.

Conclusion

It is common to think of veterans as haunted by their pasts. This is, in part, due to a focus on what is arguably a central facet of posttraumatic stress—which is the reliving of traumatic combat experience in memory or dreams. Since the Vietnam War, a signature symptom of combat trauma is the flashback memory. Focus on the flashback as the paradigmatic symptom of PTSD has not only provided fodder for rich representations of war in film and literature, but it has also influenced theoretical and clinical understandings of trauma. These influences have been both positive and negative.

One way in which these influences have been negative is in their reduction of the myriad possible experiences of combat into singular archetypes that are thought to be solely responsible for moral injury. There seem to be two prevailing archetypical flashback memories that haunt the veteran: one in which she is perpetrating violence and subsequently feeling guilty, and another in which she is subject to or witnessing violence and feeling helpless.

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20 Ibid, 102-103.
In light of singular narratives about moral injury that focus on the guilt and shame that the veteran feels for what she has done, or what she has seen others do, there is a different kind of moral injury that has been left out of prevailing accounts. One that is harder to account for. Namely, one in which a particular violent act is not the entire subject of concern, but instead an experience or set of experiences that leads to the collapse of the entire structure of morality. This kind of moral injury does not fit neatly into an archetype or a movie script. This is a different kind of moral injury, and it is one that is urgently important to consider, as it makes reintegration back into civilian society especially difficult.

What I have argued here is that perhaps the veteran isn’t only haunted by the enemy combatants or even civilians she killed, but also by the specter of a world without morals. The phenomenological framework, with its focus on the way that experiences stamp our perceptual world at large, can help us understand what it means to be haunted in this way. Beginning with this understanding of moral injury as a shattering of one’s entire moral framework can stand to positively impact both the understanding and treatment of moral injury.

References


